

This month in **wjm**

Is the MMR vaccine safe?

The combined vaccine against measles, mumps, and rubella (MMR) continues to make headline news. The popular media have fueled fears that it can cause autism, bowel disease, and other serious illnesses. Public health physicians worry that these fears will lead parents to not have their children vaccinated, which could precipitate epidemics of these potentially fatal infectious diseases. In a Curbside Consult on p 197, Edwards discusses the original study that led to the media panic, which has been widely criticized for its many possible biases. She reassures physicians and parents that there simply is no good evidence of a link between the MMR vaccine and autism.

Managed care intrudes on clinical practice

Many physicians are concerned about the growing dominance of managed care because they think that its policies can intrude on the doctor-patient relationship. These intrusions, now known as “managed-care hassles,” include limited access to specialists and the need to obtain prior approval for procedures. Sommers and colleagues performed a descriptive study of such hassles in a primary care setting and found that, on average, a physician who sees 22 patients each day experiences 1 hassle for every 4 to 5 patients. In a commentary on p 179, Bodenheimer calls for a “fundamental redesign” of US primary care.

Physicians should be aware of oral diseases

Few physicians realize that oral disease is a risk factor for premature death. Such disease has a high prevalence in the US population, but it often goes unrecognized by physicians, partly because they have never been trained in its diagnosis or management. On p 199, we begin a new 5-part series on oral health care aimed at primary care physicians. The opening article reminds us about normal tooth development and anatomy and addresses common dental problems, such as teething, early loss of teeth, and tooth discoloration.

Exercise helps osteoarthritis of the knee

A growing proportion of people in this country suffer from 1 or more of the so-called diseases of aging, such as osteoarthritis, which cause considerable morbidity, loss of independence, and impaired quality of life. Although medication can help some of the symptoms of osteoarthritis, there is growing awareness of the importance of lifestyle factors in managing patients with this condition. Can exercise help? Petrella performed a systematic review of randomized controlled trials of exercise for osteoarthritis of the knee (p 191). He found evidence of short-term benefits in patients with mild to moderate disease. Physicians should prescribe exercise for these patients, he says, but further research is needed to see if these benefits are maintained in the long term.